

**United States Bankruptcy Court
District of Oregon**

IN RE:Case No. **11-64552-fra13****McKenzie, Lorena**Chapter **13**

Debtor(s)

AMENDED SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 3,960.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 20,024.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		\$ 64,132.58	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 4,919.12
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 4,413.00
TOTAL		19	\$ 3,960.00	\$ 84,156.58	

**United States Bankruptcy Court
District of Oregon**

IN RE:Case No. 11-64552-fra13McKenzie, Lorena

Debtor(s)

Chapter 13

AMENDED STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 20,024.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 20,024.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 4,919.12
Average Expenses (from Schedule J, Line 18)	\$ 4,413.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 6,360.85

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 20,024.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 64,132.58
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 64,132.58

IN RE **McKenzie, Lorena**Case No. **11-64552-fra13**

Debtor(s)

(If known)

AMENDED SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status Separated	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): Daughter	AGE(S): 17
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation Home Health Nurse Name of Employer Signature Home Health How long employed 2 years Address of Employer 25117 SW Parkway, Ste F Wilsonville, OR 97070		

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)

	DEBTOR	SPOUSE
\$	6,540.94	\$
\$		\$

2. Estimated monthly overtime

\$		\$
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3. SUBTOTAL

\$	6,540.94	\$
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4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and Social Security

\$	1,133.36	\$
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b. Insurance

\$	12.48	\$
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c. Union dues

\$		\$
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d. Other (specify) **See Schedule Attached**

\$	475.98	\$
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\$		\$
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5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$	1,621.82	\$
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6. TOTAL NET MONTHLY TAKE HOME PAY

\$	4,919.12	\$
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7. Regular income from operation of business or profession or farm (attach detailed statement)

\$		\$
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8. Income from real property

\$		\$
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9. Interest and dividends

\$		\$
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10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

\$		\$
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11. Social Security or other government assistance
(Specify) _____

\$		\$
\$		\$

12. Pension or retirement income

\$		\$
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13. Other monthly income

\$		\$
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(Specify) _____

\$		\$
\$		\$

14. SUBTOTAL OF LINES 7 THROUGH 13

\$		\$
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15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$	4,919.12	\$
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16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)

\$	4,919.12
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(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
None

IN RE McKenzie, Lorena

Case No. 11-64552-fra13

Debtor(s)

AMENDED SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)
Continuation Sheet - Page 1 of 1

	DEBTOR	SPOUSE
Other Payroll Deductions:		
Employee Medical	5.22	
Worker Comp	1.65	
Accident Ins	28.10	
ADd Sp	0.41	
Dental/Vision	16.25	
Flex Medical	109.40	
Other Ee Deds	32.24	
ADd Ee	3.23	
ODS Premium	88.01	
ADd Sp.	0.02	
Dental	35.49	
Mdrx Ch Pre	91.41	
Mdrx Ee Pre	37.38	
Vol Life	16.86	
ORegon W/C EE w	0.15	
Dental Ft Pre	3.92	
Medrx Ee Pre	6.24	

IN RE McKenzie, LorenaCase No. 11-64552-fra13

Debtor(s)

(If known)

AMENDED SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>1,350.00</u>
a. Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
b. Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
2. Utilities:		
a. Electricity and heating fuel	\$	<u>300.00</u>
b. Water and sewer	\$	
c. Telephone	\$	
d. Other Cell Phone	\$	<u>200.00</u>
Garbage	\$	<u>25.00</u>
3. Home maintenance (repairs and upkeep)	\$	
4. Food	\$	<u>425.00</u>
5. Clothing	\$	<u>100.00</u>
6. Laundry and dry cleaning	\$	<u>33.00</u>
7. Medical and dental expenses	\$	<u>300.00</u>
8. Transportation (not including car payments)	\$	<u>900.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>100.00</u>
10. Charitable contributions	\$	<u>30.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>20.00</u>
b. Life	\$	
c. Health	\$	
d. Auto	\$	
e. Other	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) Income Taxes	\$	<u>200.00</u>
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	
b. Other	\$	
14. Alimony, maintenance, and support paid to others	\$	
15. Payments for support of additional dependents not living at your home	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other Pet Care	\$	<u>80.00</u>
Personal Care	\$	<u>150.00</u>
Daughters College Cost	\$	<u>200.00</u>

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.

\$	<u>4,413.00</u>
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19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:
None

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	<u>4,919.12</u>
b. Average monthly expenses from Line 18 above	\$	<u>4,413.00</u>
c. Monthly net income (a. minus b.)	\$	<u>506.12</u>

IN RE McKenzie, LorenaCase No. 11-64552-fra13

Debtor(s)

(If known)

AMENDED DECLARATION CONCERNING DEBTOR'S SCHEDULES**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 21 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: November 28, 2012 Signature: /s/ Lorena McKenzie
Lorena McKenzie

Debtor

Date: _____ Signature: _____
 (Joint Debtor, if any)
 [If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.